

B177

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA

v.

JOHN KEUN SANG LEE

Criminal No. **21-201**
[UNDER SEAL]

(21 U.S.C. §§ 841(a)(1), 841(b)(1)(C); and
18 U.S.C. § 1347)

INDICTMENT

FILED

COUNTS ONE THROUGH TWO HUNDRED AND FORTY-ONE

MAY 05 2021

The grand jury charges:

CLERK U.S. DISTRICT COURT

On or about the dates listed below for each count, in the Western District of Pennsylvania,

the defendant, JOHN KEUN SANG LEE, did knowingly, intentionally, and unlawfully distribute
Schedule II controlled substances, outside the usual course of professional practice and not for a
legitimate medical purpose, of the types and in the quantities listed below for each count:

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
1.	4/24/2017	4/25/2017	OXYMORPHONE HCL ER 20 MG TAB	30	J.H.
2.	4/25/2017	4/25/2017	OXYCODONE HCL 10 MG TABLET	60	J.H.
3.	5/25/2017	5/25/2017	OXYCODONE HCL 15 MG TABLET	60	J.H.
4.	5/25/2017	5/25/2017	OXYMORPHONE HCL ER 20 MG TAB	30	J.H.
5.	6/22/2017	6/22/2017	OXYCODONE HCL 15 MG TABLET	60	J.H.
6.	6/22/2017	6/22/2017	OXYMORPHONE HCL ER 20 MG TAB	30	J.H.
7.	7/11/2017	7/18/2017	OXYCODONE HCL 15 MG TABLET	60	J.H.
8.	7/20/2017	7/20/2017	OXYMORPHONE HCL ER 15 MG TAB	30	J.H.
9.	9/5/2017	9/5/2017	OXYCODONE HCL 15 MG TABLET	30	J.H.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
10.	9/5/2017	10/9/2017	OXYCODONE HCL 15 MG TABLET	30	J.H.
11.	9/5/2017	9/5/2017	OXYMORPHONE HCL ER 20 MG TAB	30	J.H.
12.	9/5/2017	10/9/2017	OXYMORPHONE HCL ER 20 MG TAB	30	J.H.
13.	9/22/2017	9/26/2017	OXYCODONE HCL 15 MG TABLET	30	J.H.
14.	10/24/2017	10/30/2017	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
15.	11/28/2017	11/28/2017	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
16.	1/25/2018	1/25/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
17.	2/23/2018	2/23/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
18.	2/23/2018	3/19/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
19.	2/27/2018	4/18/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
20.	4/10/2018	5/17/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
21.	6/5/2018	6/15/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
22.	6/5/2018	7/17/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
23.	8/7/2018	8/15/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
24.	8/7/2018	9/14/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
25.	10/2/2018	11/13/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
26.	10/2/2018	10/12/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
27.	11/26/2018	12/13/2018	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
28.	1/8/2019	1/8/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
29.	1/22/2019	1/31/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
30.	1/22/2019	3/5/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
31.	3/19/2019	4/3/2019	OXYMORPHONE HCL	60	J.H.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
			ER 20 MG TAB		
32.	3/19/2019	5/3/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
33.	6/3/2019	6/3/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
34.	7/9/2019	7/9/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
35.	7/9/2019	8/7/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
36.	9/3/2019	9/4/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
37.	9/27/2019	10/2/2019	XTAMPZA ER 36 MG CAPSULE	60	J.H.
38.	10/29/2019	11/2/2019	OXYMORPHONE HCL 10 MG TABLET	60	J.H.
39.	10/29/2019	11/2/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
40.	11/22/2019	11/25/2019	LEVORPHANOL 2 MG TABLET	90	J.H.
41.	11/25/2019	11/30/2019	OXYMORPHONE HCL 10 MG TABLET	60	J.H.
42.	11/25/2019	11/30/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
43.	12/11/2019	12/18/2019	LEVORPHANOL 2 MG TABLET	90	J.H.
44.	12/11/2019	12/23/2019	OXYMORPHONE HCL 10 MG TABLET	60	J.H.
45.	12/11/2019	12/23/2019	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
46.	1/16/2020	1/20/2020	LEVORPHANOL 2 MG TABLET	90	J.H.
47.	1/17/2020	1/17/2020	OXYMORPHONE HCL 10 MG TABLET	60	J.H.
48.	1/17/2020	1/17/2020	OXYMORPHONE HCL ER 20 MG TAB	60	J.H.
49.	2/14/2020	2/18/2020	OXYCODONE HCL 30 MG TABLET	30	J.H.
50.	2/14/2020	2/18/2020	OXYMORPHONE HCL 10 MG TABLET	30	J.H.
51.	2/17/2020	2/24/2020	LEVORPHANOL 2 MG TABLET	90	J.H.
52.	3/16/2020	3/16/2020	MORPHINE SULFATE IR 15 MG TAB	60	J.H.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
53.	3/16/2020	3/16/2020	OXYCODONE HCL 30 MG TABLET	30	J.H.
54.	3/19/2020	4/20/2020	LEVORPHANOL 2 MG TABLET	90	J.H.
55.	3/24/2020	3/24/2020	MORPHINE SULFATE IR 30 MG TAB	30	J.H.
56.	4/14/2020	4/14/2020	MORPHINE SULFATE IR 15 MG TAB	60	J.H.
57.	4/14/2020	4/14/2020	OXYCODONE HCL 30 MG TABLET	30	J.H.
58.	4/21/2020	5/13/2020	MORPHINE SULFATE IR 15 MG TAB	60	J.H.
59.	4/21/2020	5/13/2020	OXYCODONE HCL 30 MG TABLET	30	J.H.
60.	6/17/2020	6/18/2020	OXYMORPHONE HCL 10 MG TABLET	90	J.H.
61.	7/15/2020	7/17/2020	OXYMORPHONE HCL 10 MG TABLET	90	J.H.
62.	7/29/2020	8/14/2020	OXYMORPHONE HCL 10 MG TABLET	90	J.H.
63.	9/5/2020	9/11/2020	OXYMORPHONE HCL 10 MG TABLET	90	J.H.
64.	10/7/2020	10/8/2020	OXYMORPHONE HCL 10 MG TABLET	90	J.H.
65.	9/26/2016	9/26/2016	OXYCODONE HCL 15 MG TABLET	30	J.C.
66.	9/29/2016	10/6/2016	SUBSYS 400 MCG SPRAY	120	J.C.
67.	10/31/2016	11/1/2016	SUBSYS 400 MCG SPRAY	120	J.C.
68.	12/1/2016	12/1/2016	SUBSYS 400 MCG SPRAY	120	J.C.
69.	12/28/2016	12/28/2016	SUBSYS 400 MCG SPRAY	120	J.C.
70.	1/28/2017	1/30/2017	SUBSYS 400 MCG SPRAY	120	J.C.
71.	2/28/2017	2/28/2017	SUBSYS 400 MCG SPRAY	120	J.C.
72.	4/3/2017	4/4/2017	SUBSYS 400 MCG SPRAY	120	J.C.
73.	5/17/2017	5/30/2017	SUBSYS 400 MCG SPRAY	120	J.C.
74.	6/19/2017	6/29/2017	SUBSYS 400 MCG	120	J.C.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
			SPRAY		
75.	7/24/2017	7/27/2017	SUBSYS 400 MCG SPRAY	120	J.C.
76.	8/14/2017	8/24/2017	SUBSYS 400 MCG SPRAY	120	J.C.
77.	9/11/2017	9/21/2017	SUBSYS 400 MCG SPRAY	120	J.C.
78.	10/12/2017	10/26/2017	SUBSYS 400 MCG SPRAY	120	J.C.
79.	11/9/2017	11/22/2017	SUBSYS 400 MCG SPRAY	120	J.C.
80.	11/30/2017	12/20/2017	SUBSYS 400 MCG SPRAY	120	J.C.
81.	1/4/2018	1/18/2018	SUBSYS 400 MCG SPRAY	120	J.C.
82.	2/1/2018	2/15/2018	SUBSYS 400 MCG SPRAY	120	J.C.
83.	3/12/2018	3/15/2018	SUBSYS 400 MCG SPRAY	120	J.C.
84.	4/10/2018	4/12/2018	SUBSYS 400 MCG SPRAY	120	J.C.
85.	5/10/2018	5/21/2018	SUBSYS 400 MCG SPRAY	120	J.C.
86.	6/4/2018	6/18/2018	SUBSYS 400 MCG SPRAY	120	J.C.
87.	7/2/2018	7/16/2018	SUBSYS 400 MCG SPRAY	120	J.C.
88.	7/30/2018	8/13/2018	SUBSYS 400 MCG SPRAY	120	J.C.
89.	9/10/2018	9/10/2018	SUBSYS 400 MCG SPRAY	120	J.C.
90.	9/24/2018	10/8/2018	SUBSYS 400 MCG SPRAY	120	J.C.
91.	10/17/2018	11/5/2018	SUBSYS 400 MCG SPRAY	120	J.C.
92.	5/31/2016	6/13/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
93.	5/24/2016	6/20/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
94.	7/2/2016	7/2/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
95.	5/24/2016	7/19/2016	HYDROCODONE/APAP 80/200MG	60	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
96.	7/7/2016	7/21/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
97.	8/9/2016	8/9/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
98.	7/12/2016	8/18/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
99.	8/22/2016	8/29/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
100	7/12/2016	9/16/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
101	9/12/2016	9/17/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
102	10/5/2016	10/6/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
103	9/6/2016	10/17/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
104	10/31/2016	11/1/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
105	11/1/2016	11/17/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
106	11/21/2016	11/22/2016	ABSTRAL 400 MCG TAB SUBLINGUAL	96	L.K.
107	11/1/2016	12/15/2016	HYDROCODONE/APAP 80/200MG	60	L.K.
108	1/3/2017	1/4/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
109	1/3/2017	1/13/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
110	1/23/2017	1/25/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
111	1/3/2017	2/14/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
112	2/20/2017	2/20/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
113	3/7/2017	3/14/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
114	3/13/2017	3/16/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
115	4/3/2017	4/5/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
116	3/17/2017	4/13/2017	HYDROCODONE/APAP 80/200MG	60	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
117	4/26/2017	4/28/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
118	5/16/2017	5/16/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
119	5/22/2017	5/23/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
120	6/8/2017	6/12/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
121	5/16/2017	6/13/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
122	7/3/2017	7/6/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
123	7/11/2017	7/14/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
124	7/18/2017	7/18/2017	FENTANYL 25 MCG/HR PATCH	10	L.K.
125	7/26/2017	8/14/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
126	7/18/2017	8/15/2017	FENTANYL 25 MCG/HR PATCH	10	L.K.
127	8/17/2017	9/7/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
128	9/19/2017	9/19/2017	FENTANYL 50 MCG/HR PATCH	10	L.K.
129	9/13/2017	9/27/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
130	9/28/2017	10/17/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
131	9/15/2017	10/23/2017	FENTANYL 50 MCG/HR PATCH	10	L.K.
132	10/24/2017	11/6/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
133	11/14/2017	11/16/2017	HYDROCODONE/APAP 80/200MG	60	L.K.
134	11/14/2017	11/16/2017	FENTANYL 50 MCG/HR PATCH	10	L.K.
135	11/14/2017	11/16/2017	OXYCODONE HCL 15 MG TABLET	20	L.K.
136	11/20/2017	11/27/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
137	12/7/2017	12/18/2017	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
138	12/21/2017	1/12/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
139	1/16/2018	1/17/2018	FENTANYL 50 MCG/HR PATCH	10	L.K.
140	1/16/2018	1/17/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
141	1/16/2018	1/17/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
142	1/24/2018	2/5/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
143	1/16/2018	2/14/2018	FENTANYL 50 MCG/HR PATCH	10	L.K.
144	1/16/2018	2/14/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
145	1/16/2018	2/14/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
146	2/19/2018	2/27/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
147	3/12/2018	3/20/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
148	3/20/2018	3/20/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
149	3/20/2018	3/20/2018	FENTANYL 50 MCG/HR PATCH	10	L.K.
150	3/20/2018	3/20/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
151	3/27/2018	4/9/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
152	3/20/2018	4/17/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
153	3/20/2018	4/17/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
154	3/20/2018	4/17/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
155	4/16/2018	5/2/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
156	5/16/2018	5/17/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
157	5/16/2018	5/17/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
158	5/16/2018	5/17/2018	HYDROCODONE/APAP 80/200MG	60	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
159	4/30/2018	5/24/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
160	5/29/2018	6/14/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
161	5/16/2018	6/14/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
162	5/16/2018	6/14/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
163	5/16/2018	6/14/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
164	6/25/2018	7/5/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
165	7/19/2018	7/25/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
166	7/3/2018	7/25/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
167	7/24/2018	7/25/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
168	7/24/2018	7/25/2018	HYDROCODONE/APAP 90/200MG	60	L.K.
169	8/13/2018	8/14/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
170	7/3/2018	8/20/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
171	7/3/2018	8/20/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
172	7/3/2018	8/20/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
173	9/5/2018	9/7/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
174	8/28/2018	9/13/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
175	8/28/2018	9/13/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
176	10/1/2018	10/1/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
177	8/28/2018	10/1/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
178	8/28/2018	10/12/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
179	8/28/2018	10/12/2018	HYDROCODONE/APAP 80/200MG	60	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
180	10/17/2018	10/22/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
181	8/28/2018	11/2/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
182	11/12/2018	11/13/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
183	10/23/2018	11/14/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
184	10/23/2018	11/14/2018	HYDROCODONE/APAP 80/200MG	60	L.K.
185	10/23/2018	12/3/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
186	12/6/2018	12/7/2018	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
187	10/23/2018	12/13/2018	FENTANYL 75 MCG/HR PATCH	10	L.K.
188	10/23/2018	12/26/2018	OXYCODONE HCL 15 MG TABLET	20	L.K.
189	1/3/2019	1/4/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
190	12/14/2018	1/11/2019	HYDROCODONE/APAP 80/200MG	60	L.K.
191	12/14/2018	1/11/2019	FENTANYL 75 MCG/HR PATCH	10	L.K.
192	12/14/2018	1/24/2019	OXYCODONE HCL 15 MG TABLET	20	L.K.
193	1/31/2019	2/1/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
194	2/13/2019	2/14/2019	HYDROCODONE/APAP 80/200MG	60	L.K.
195	2/13/2019	2/14/2019	FENTANYL 75 MCG/HR PATCH	10	L.K.
196	3/1/2019	3/1/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
197	2/12/2019	3/11/2019	HYDROCODONE/APAP 80/200MG	60	L.K.
198	2/12/2019	3/11/2019	FENTANYL 75 MCG/HR PATCH	10	L.K.
199	3/25/2019	3/29/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
200	4/10/2019	4/10/2019	FENTANYL 75 MCG/HR PATCH	10	L.K.

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
201	4/10/2019	4/10/2019	HYDROCODONE/APAP 80/200MG	60	L.K.
202	4/10/2019	4/10/2019	OXYCODONE HCL 15 MG TABLET	30	L.K.
203	4/30/2019	5/2/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
204	4/8/2019	5/10/2019	HYDROCODONE/APAP 80/200MG	60	L.K.
205	4/8/2019	5/10/2019	FENTANYL 75 MCG/HR PATCH	10	L.K.
206	4/8/2019	5/10/2019	OXYCODONE HCL 15 MG TABLET	30	L.K.
207	5/24/2019	5/29/2019	ABSTRAL 600 MCG TAB SUBLINGUAL	96	L.K.
208	1/31/2017	1/31/2017	OXYCODONE HCL 15 MG TABLET	30	N.M. (1)
209	1/31/2017	1/31/2017	OXYCODONE-ACETAMINOPHEN 10-325	60	N.M. (1)
210	1/31/2017	2/27/2017	OXYCODONE-ACETAMINOPHEN 10-325	60	N.M. (1)
211	5/16/2017	5/16/2017	OXYCODONE-ACETAMINOPHEN 10-325	30	N.M. (1)
212	5/16/2017	5/16/2017	OXYMORPHONE HCL ER 20 MG TAB	30	N.M. (1)
213	6/21/2017	6/21/2017	OXYCODONE-ACETAMINOPHEN 10-325	30	N.M. (1)
214	6/21/2017	6/21/2017	OXYMORPHONE HCL ER 20 MG TAB	30	N.M. (1)
215	5/20/2016	5/20/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
216	6/19/2016	6/20/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
217	7/17/2016	7/19/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
218	7/12/2016	8/18/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
219	8/30/2016	9/17/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
220	8/30/2016	10/17/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
221	10/28/2016	11/16/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
222	12/16/2016	12/16/2016	OXYCONTIN 80 MG TABLET	80	N.M. (2)
223	1/10/2017	1/13/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
224	1/10/2017	2/14/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
225	3/9/2017	3/14/2017	OXYCONTIN 80 MG TABLET	90	N.M. (2)
226	3/7/2017	4/13/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
227	3/9/2017	5/12/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
228	5/1/2017	6/12/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
229	7/11/2017	7/12/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
230	7/11/2017	8/11/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
231	9/12/2017	9/12/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
232	11/7/2017	11/10/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
233	11/9/2017	12/11/2017	OXYCONTIN 80 MG TABLET	80	N.M. (2)
234	1/9/2018	1/9/2018	OXYCONTIN 80 MG TABLET	80	N.M. (2)
235	1/9/2018	2/9/2018	OXYCONTIN 80 MG TABLET	80	N.M. (2)
236	3/6/2018	3/9/2018	OXYCONTIN 80 MG TABLET	80	N.M. (2)
237	3/6/2018	4/6/2018	OXYCONTIN 80 MG TABLET	80	N.M. (2)
238	5/1/2018	5/3/2018	FENTANYL 75 MCG/HR PATCH	15	N.M. (2)
239	5/1/2018	5/30/2018	FENTANYL 75 MCG/HR PATCH	15	N.M. (2)
240	5/1/2018	5/1/2018	OXYCODONE HCL 15 MG TABLET	30	N.M. (2)

Count	Date Written	Date Filled	Drug	Quantity Prescribed	Recipient of Prescription
241	5/1/2018	5/30/2018	OXYCODONE HCL 15 MG TABLET	30	N.M. (2)

In violation of Title 21, United States Code, Sections 841(a)(1) and 841(b)(1)(C).

COUNT TWO HUNDRED AND FORTY-TWO

The grand jury further charges:

At all times material to this Indictment:

1. The Medicare Program ("Medicare") was a "healthcare benefit program" as defined by Title 18, United States Code, Section 24(b), in that it provided payments for health care services, including physician services, to individuals who were 65 or older, had certain disabilities, or had end-stage renal disease. The Medicare Program was funded by the federal government.

2. The Medicaid Program ("Medicaid") was a "healthcare benefit program," as defined by Title 18, United States Code, Section 24(b), in that it provided payment for health care services, including physician services. The Pennsylvania Medicaid Program, also known as Medical Assistance, was jointly funded by the federal government and Commonwealth of Pennsylvania.

3. To receive benefits from Medicare and Medicaid, enrolled health care providers agreed to abide by the policies and procedures, rules, and regulations governing reimbursement. Among other requirements, health care providers could only submit claims to Medicare and Medicaid for items and services that were "reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member."

4. The defendant, JOHN KEUN SANG LEE, was a medical doctor and owner of the medical practice Jefferson Pain and Rehabilitation Center, with a principal office located at 4735 Clairton Blvd, Pittsburgh, PA 15236.

5. Persons known and unknown to the grand jury were patients of the defendant, JOHN KEUN SANG LEE, and were insured individuals of Medicare and/or Medicaid. Medicare and Medicaid, and their managed health care organizations, paid the cost of services provided by JOHN KEUN SANG LEE, including his practice's administration of steroid injections, such as

trigger point injections, caudal injections, lumbar epidural injections, intercostal injections, bilateral sacroiliac joint injections, suprascapular nerve injections, sciatic nerve block injections, lumbar RFA, and lumbar medial branch block injections.

THE SCHEME

6. From in or around May 2016, and continuing thereafter to in or around October 2020, in the Western District of Pennsylvania, the defendant, JOHN KEUN SANG LEE, did knowingly and willfully execute and attempt to execute a scheme and artifice to defraud a health care benefit program, that is Medicare and Medicaid, and to obtain, by means of false and fraudulent pretenses, representations and promises, money and property owned by such health care benefit programs, in connection with the delivery of and payment for health care benefits, items, and services, which scheme and artifice to defraud and to obtain money was in sum and substance as follows:

7. It was part of the scheme and artifice that the defendant, JOHN KEUN SANG LEE, performed repetitive and medically unnecessary injections on patients, in many cases for several years, and, at times, directly against the patient's express wishes, in order to increase revenue.

8. It was further part of the scheme and artifice that the defendant, JOHN KEUN SANG LEE, expressly conditioned his prescribing of controlled substances on patients agreeing to submit to repetitive and medically unnecessary injections.

9. It was further part of the scheme and artifice that the defendant, JOHN KEUN SANG LEE, required patients to change their insurance providers in order to increase reimbursements for said repetitive and medically unnecessary injections.

10. It was further part of the scheme and artifice that the defendant, JOHN KEUN SANG LEE, directed and paid bonuses to employees in his practice to increase referrals to a facility owned by JOHN KEUN SANG LEE where he would perform medically unnecessary injections.

11. It was further part of the scheme that the defendant, JOHN KEUN SANG LEE, knowingly and willfully submitted or caused the submission of claims to Medicare and Medicaid to pay for injections that were neither reasonable nor medically necessary.

EXECUTION

12. From in or around May 2016, and continuing thereafter to in or around October 2020, in the Western District of Pennsylvania, the defendant, JOHN KEUN SANG LEE, did knowingly and willfully execute and attempt to execute the aforesaid scheme and artifice to defraud a health care benefit program as defined in Title 18, United States Code, Section 24(b), in connection with the payment for health care benefits and items.

In violation of Title 18, United States Code, Section 1347.

FORFEITURE ALLEGATIONS

1. The grand jury re-alleges and incorporates by reference the allegations contained in Counts One through Two Hundred and Forty-One of this Indictment for the purpose of alleging criminal forfeiture pursuant to Title 21, United States Code, Section 853(a). Pursuant to Title 21, United States Code, Section 853, upon conviction of an offense in violation of Title 21, United States Code, Sections 841, the defendant, JOHN KEUN SANG LEE, shall forfeit to the United States of America any property used, and intended to be used, in any manner and part, to commit, and to facilitate the commission of, such violations. The property to be forfeited includes, but is not limited to, the following: a) Pennsylvania state license to practice medicine number MD037447Y; and b) Drug Enforcement Administration number AL1107968.

2. The United States Attorney further re-alleges and incorporates by reference the allegations contained in Count Two Hundred and Forty-Two of this Indictment for the purpose of alleging criminal forfeiture pursuant to Title 18, United States Code, Section 982(a)(7). Pursuant to Title 18, United States Code, Section 982, upon conviction of an offense in violation of Title 18, United States Code, Sections 1347, the defendant, JOHN KEUN SANG LEE, shall forfeit to the United States of America any property constituting, or derived from, proceeds traceable to such offense, including, but not limited to the a sum of money equal to \$141,000 in United States currency, representing the amount of proceeds obtained as a result of the offense charged in Count Two Hundred and Forty-Two of the Indictment.

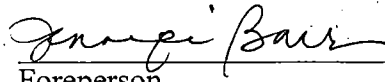
3. If, through any act or omission by the defendant, JOHN KEUN SANG LEE, the property described in Paragraph 2 above (hereinafter the "Subject Property"):

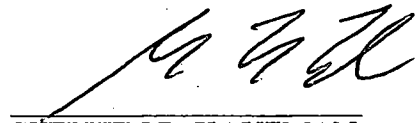
- a. Cannot be located upon the exercise of due diligence;
- b. Has been transferred, sold to, or deposited with a third person;

- c. Has been placed beyond the jurisdiction of the Court;
- d. Has been substantially diminished in value; or
- e. Has been commingled with other property which cannot be subdivided without difficulty,

the United States intends to seek forfeiture of any other property of the defendant, JOHN KEUN SANG LEE, up to the value of the Subject Property forfeitable above pursuant to Title 21, United States Code, Section 853(p), and Title 28, United States Code, Section 2461(c).

A True Bill,


Foreperson


STEPHEN R. KAUFMAN
Acting United States Attorney
PA Bar No. 42108